CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR C	COMMITTEE		
10.08.10	Tité Con	MITTEE	TO EL	ECT JOHN	TURNER
2.b. IF COMMITTEE, NAME OF CANDIDATE		4		3. ELECTION D	ATE
JOHN C. TURNER					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	Cit.				
Street of Rufal Route	City		State	Zip Code	Phone
4.b. CANDIDATE'S HOME ADDRESS (if differen	ot than 4 a)	· · · · · · · · · · · · · · · · · · ·			
Street or Rural Route	City		State	Zip Code	Phone
5631 MISTY VALLEY DE	DOLTEWA	44	TN	37363	423.240.6407
OFFICE SOUGHT (include district number,	if applicable)	6. NAME (OF POLITICAL	TREASURER (ma	
COUNTY COMMISSION DIST G	1	ANTH	ONY S	ANDERS	
7. CATEGORY OR REPORT (Check one)	-				
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL	SUPPLEMEN	
		8.b. ENDING	DATE OF REPO	ORTING PERIOD	
9. (Check one)		09.3	50.10		=
a. This campaign is exempt from detaile tures total \$1,000 or less for this rep	ed disclosure becaus	se contributions	(including in-k	ind) received total s	\$1,000 or less AND expendi-
/					
b. This campaign is required to file a de and/or expenditures total more than	stailed financial disclusions and stailed financial disclusions. Stail 1988 the stail of the sta	osure because	contributions (i	ncluding in-kind) re	ceived total more than \$1,000
		mig periou.			9
10. I/we do solemnly swear or affirm that the i	nformation contained	d in this campa	ion financial di	sclosure remort is t	rue and that this raport is an
accurate accounting of campaign contributi	ons and expenditure	s required to be	a renorted by th	andidata admin	ittoo bu the Commeien
Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other no	swear or affirm that npolitical purpose as	no campaign c defined by the	ontributions ha	ve/been/expended	for the personal financial
001		domina by the	Todord The The		
Cok C. Jurner	10.08.10 date		/ X4	11/14	(0/08/10
signature of candidate	date	7	signature	of political treasure	r date
		9 4	- 4	V	
11. WITNESS SIGNATURE			. / -		
Klad of lander	10/08/1	2 (N.	PIL	des 10/8/10
signature of witness	10/08/1	_	Mr	A Du	10/8/10
olgitatare of withess	uate	9	signa	ature of witness	date
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT				. 301	24
S. B. WOL ON I AND DAST REPORT				\$	
b. TOTAL RECEIPTS THIS PERIOD				\$	
c. TOTAL DISBURSEMENTS THIS PERIOD				•	
5 5 ESIODOROLINIENTO THIS PERIOD			••••••	\$ —	
d. BALANCE ON HAND (12.a. plus 12.b. ı	minus 12.c.)				s_301.24
e. TOTAL LOANS OUTSTANDING	nin oct II V	7			\$ 1,337. W
					d
	SSIMMOJ				\$ ———
100°	MAMILTON MITOR IF				



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVE	RING THE PERIOD
THE COMMITTEE TO ELECT JOHN C. TURNE	FROM: 64.30.10		
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this pe	eriod)	\$	
b. Itemized Contributions (over \$100 from each source this period)		\$	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 18	5.a. and 15.b.).		\$
16. LOANS RECEIVED THIS REPORTING PERIOD			\$
17. INTEREST RECEIVED THIS REPORTING PERIOD			\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in iten	n 12.b.)		\$
DISBURSEMENTS			
19. EXPENDITURES (other than loan payments)			
a. Expenditures (\$100 or less each payee this period) (must be listed	by category - e	e.g., printing, postage,	gasoline)
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
T-1-1-65			
Total of Expenditures (\$100 or less each payee)			-
b. Itemized Expenditures (Over \$100 each payee this period)			_
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. a			
20. LOAN REPAYMENTS MADE THIS PERIOD			V
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in	item 12.c.)		.\$
22.IN-KIND CONTRIBUTIONS			
a. Unitemized in-kind contributions (\$100 or less from each source thi			-
b. Itemized in-kind contributions (over \$100 from each source this per			_
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add	d 22.a. and 22.b	0.)	.\$
23. OBLIGATIONS			
a. Unitemized Obligations Outstanding (\$100 or less each)			
b. Itemized Obligations Outstanding (Over \$100 each)		V	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must	t be shown i iter	n 12.f.)	.\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	ING THE PERIOD
				FROM: 04.30.10	TO: 09.30.10
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	M PRECEDING PAG	GF (enter \$0 if first itemized n	ane)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR E					
First Name	Middle Nam		Contribution Received For:	Too from any contributor	Amount of Contribution
					ranount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address		Runoff (Local Election	is Only)		
City	State	Zip Code	Date of Contribution	Aggregate This Election	
Occupation					
Facilities					
Employer					
First Name	1				
First Name	Middle Nam	ne	Contribution Received For		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	*
			1 _		
Address			Runoff (Local Election	ns Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer			1		
First Name	Middle Name	е	Contribution Received For		Amount of Contribution
First Name Last Name/Organization Name	Middle Namo	9		☐ General Election	Amount of Contribution
	Middle Name	9		General Election	Amount of Contribution
Last Name/Organization Name	Middle Name	e Zip Code	Primary Election	General Election	Amount of Contribution Aggregate This Election
Last Name/Organization Name Address			☐ Primary Election [General Election	
Last Name/Organization Name Address City			☐ Primary Election [General Election	
Last Name/Organization Name Address City Occupation			☐ Primary Election [General Election	
Last Name/Organization Name Address City Occupation		Zip Code	☐ Primary Election [General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election	
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address	State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election General Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election General Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nam State	Zip Code e Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election General Election	Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR	COMMITTEE			2. REPORT COVER	RING THE PERIOD			
				FROM:06.30.10	10:09. 30 . 10 Amount			
3. TOTAL ITEMIZED IN-KIND	CONTRIBUTIONS FR	OM PRECEDING PA	GE (enter \$0 if first itemized page)	Amount			
			RIBUTION (in-kind contributions totaling i	,	atributor during the period			
First Name			In-Kind Contribution Received		THE RESERVE OF THE PERSON NAMED IN			
FIRST Name	st Name Middle Name			For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name	=							
Add			Runoff (Local Election	s Only)	-			
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State Zip Code		Description of In-Kind Contribution					
Occupation	Employer							
First Name	1 8 8 2 2 1	Name	In Mind On the Fig. 19					
riist Name	Middle	Name	In-Kind Contribution Received Primary Election	General Election	Value of In-Kind Contribution			
Last Name/Organization Name								
Address			Runoff (Local Election	is Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution	Description of In-Kind Contribution				
Occupation	Employer							
First Name of State o				The second second second	Value of In-Kind Contribution			
First Name	Middle	e Name	In-Kind Contribution Receive	In-Kind Contribution Received For: Primary Election General Election				
Last Name/Organization Name								
Address			Runoff (Local Election	is Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer							
First Name					_			
First Name	Middle	e Name		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Value or				
Last Name/Organization Name	3 2 2	4-2-3						
			Runoff (Local Election	ns Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer							
First Name	Middle	Name	In-Kind Contribution Receive	ad Ear	Malus at la 10 10 10 10 10			
	Ivilodie	Hante		General Election	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Election					
Address			Date of In-Kind Contribution	is Only)	Accessed to the St. of			
		5	Date of Iterating Continuous		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution		· · · · · · · · · · · · · · · · · · ·			
Occupation	Employer							
			The state of the s					
5. TOTAL ITEMIZED IN-KIND	CONTRIBUTIONS							
(Carry forward to item 3. of next page	ge if additional pages of this fo	orm are used.)						
(If this is the last page of in-kind cor	ntributions, this amount must	be shown in item 22b. of sui	mmary.)		0			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT	COVERING THE PERIOD	
				FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	ne)	Amount				
4. COMPLETE THE APPROPRIATE ITEMS FOR E						
	The second second			to any payee durin	The state of the s	
First Name	Middle Nar	ne	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name						
Address						
Address						
City	State	Zip Code				
	-	l v	*	the state of the s		
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code	1			
First Name	Middle Nar	ne .	Purpose of Expenditure		Amount of Conservations	
	IVIIOGIE IVAI	ile.	Fulpose of Experiolitie		Amount of Expenditure	
Last Name/Business Name						
Address			1			
City	State	Zip Code	1			
				1		
First Name	Middle Nam	le	Purpose of Expenditure	Purpose of Expenditure		
Last Name/Business Name			-			
Address						
City	State	Zip Code	-			
First Name	Middle Nam	9	Purpose of Expenditure		Amount of Fun and the	
	Wilddle IVall		Fulpose of Experiolitie		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middl- N		Dumana of E	~		
i iist Maille	Middle Nam	e .	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
Mulicoo						
City	State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES						
(Carry forward to item 3 of payt page if additional page)		ro used \				
(Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus	of this form a t be shown in	item 19b. of summary \				

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ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE	OR COMMITTEE	v.					2.	REPORT (COVER	ING TH	HE PERIOD
								OM:		TO:	
3. COMPLETE THE APPR	OPRIATE ITEMS	FOR EACH I	TEMIZ	ZED LOAN (loans totaling n	nore than \$100	0 from any source	during the pe	riod)		
Complete the Following for the	all get the second										
First Name	Middle Na			Outstanding L	oan Balance	Loans	1 1	oan	Oute	tandina l	oan Palanco
			(Beginning of Period) Received					Loan Outstanding Loan B Payments (End of Period			
Last Name/Organization Name											
Address				Loan Receive				Date of Loa	in .	3.5	
City	State	Zip Code		Primary		☐ Genera	I Election				
					(Local Elections						
	List All Endo	rsers or Guara	antors f	or Above Loa	n (If more spa	ice is neede	d please attach	a page)			
First Name		Middle Name	9		First Name				Middle	Name	
Last Name/Organization Name					Last Name/Or	ganization Na	me				
Address					Address	71					
City		State	Zip C	ode	City				State	T	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding				
First Name		Middle Name)		First Name				Middle	Name	
Last Name/Organization Name					Last Name/Or	ganization Na	me				
Address					Address						
City		State	Zip C	ode	City		14		State	7	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding	~			
First Name		Middle Name)		First Name				Middle	e Name	
Last Name/Organization Name		<u>'</u>			Last Name/Or	ganization Na	me				
Address					Address						
City		State	Zip C	ode	City				State		Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding				
First Name		Middle Name)		First Name				Middle	Name	
Last Name/Organization Name					Last Name/Or	ganization Na	me				
Address			-		Address						
City		State	Zip C	ode	City		4		State		7in Cod-
Amount Guaranteed Outstanding						-110 : :			State		Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	naing				
4. Totals for all Loans (comp	olete on last page o	fitemized loa	ans)		Outstanding L	oan Balance	Loans	Loa	an	Outsta	anding Loan Balance
(Total loans received should also (Total loan payments should also	be shown in item 16. or	summary page.)		(Beginning		Received	Paym			End of Period)
(Total outstanding loan balance sh											



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
				FROM:	TO:	
COMPLETE THE APPROPRIATE ITEMS	n \$100 ow	I ITEMIZED ed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Nar	me				
Last Name/Business Name						
Address			-			
City	State	Zip Code	-	8		
Description of Obligation		1			L	
First Name	st Name Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation				4		
First Name	Middle Nar	ne				
Last Name/Business Name		E X	-			
Address						
City	State	Zip Code				2.
Description of Obligation						
	-					
First Name	Middle Nar	me	*			
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation	14		***	6		
First Name	Middle Nar	ne				
Last Name/Business Name						n
Address			,			
City	State	Zip Code				
Description of Obligation						
4. TOTALS				A STATE OF THE STA		
(Total from Outstanding Balance - (End of Period) in item 23b. on summary page.)	column mus	t also be shown				
in term 250. On Summary page.)						1 1